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I hareby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: Practitioners associated with the Oustomer Number: X 23524 2332 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Registration Registration Name Name Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment socuments attached to this form in accordance with S7 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 23524 $\circ \circ$ Firm or Individual Name Address City Zig State Country Telephone Email Assignee Name and Address: Eliposki Remote Ltd., L.L.C. 2711 Centerville Rd, Suite 400 Wilmington, DE 19808 USA A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee. and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and fittle is supplied below is authorized to act on behalf of the assignee Signature Cate Name Chervi Bradiev Telephone 1336 Authorized Person for Eliposki **Remote Ltd.**, L.L.C

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is in file (and by the USPTC to process) an application. Confidentially is payerned by 35 U.S.C. 122 and 37 OFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, violating gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Crief information Officer. U.S. Patern and Trademark Office, U.S. Desagnment of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480, DO NOT SEND FEES OR COMPLETED FORMS TO THE ACCRESS SEND TO: Commissioner for Petents, P.O. Box 1450, Alexandria, VA 22213-1450.

DECLARATION REGARDING AUTHORITY TO SIGN ON BEHALF OF A LEGAL ENTITY 37 C.F.R. 3.73(b)(2)(i)

I. Cheryl Bradley (whose title is supplied below), hereby declare that I am authorized to sign on behalf of Eliposki Remote Ltd., L.L.C.

Cheryl Bradley

Authorized Person for Elipoeki Remote Ltd., L.L.C.

5/11/2011

(date)